FORM NO. PAS-3

[Pursuant to section 39(4) and 42 (9) of the CompaniesAct, 2013 and rule 12 and 14 of the Companies (Prospectus and Allotment of Securities)



Return of Allotment

Rules, 2014] Form language • English Hindi Refer the instruction kit for filing the form. Pre-fill 1.(a) *Corporate Identity Number (CIN) of company L24233MH2016PLC274202 (b) Global Location Number (GLN) of Company LASA SUPERGENERICS LIMITED 2.(a) Name of the company Plot no. C-4, C-4/1, MIDC (b) Address of the Registered Lote Parshuram Industrial Area, Tal -Khed, office of the company Khed Ratnagiri Maharashtra 415722 (c) *Email Id of the company cs@lasalabs.com 3. Securities allotted payable in cash *Number of allotments (DD/MM/YYYY) (i)* Date of allotment (DD/MM/YYYY) (ii)(a) Date of passing shareholders' resolution (b) SRN of Form No. MGT-14 Equity shares Equity Shares Debentures Preference **Particulars** with without shares differential rights Differential rights Brief particulars of terms and conditions Number of securities allotted (in Rs.) Nominal amount per security Total nominal amount (in Rs.) Amount paid per security on application (excluding premium) (in Rs.) Total amount paid on application (in Rs.) (excluding premium) Amount due and payable on allotment per security (excluding premium) (in Rs.) Total Amount payable on allotment (excluding premium) (in Rs.) Premium amount per security due and (in Rs.) payable (if any) Total premium amount due and payable (in Rs.) (if any) Premium amount paid per security (if any) Total premium amount paid (if any) (in Rs.) Amount of discount per security (if any) (in Rs.) Total discount amount (if any) (in Rs.) Amount to be paid on calls per security (in Rs.) (if any) (excluding premium) Total amount to be paid on calls (if any) (in Rs.) (excluding premium)

(i)*Date of allotment	05/01/2023	3	(DD/MM/YYYY)	
(ii)(a) Date of passing shareholders' resolution	n		(DD/MM/YYYY)	
(b) SRN of Form No. MGT-14				
Particulars	Preference	Equity share:	Equity Shares	Debentures
Number of securities allotted	alaxina di Sala		differential rights	
Nominal amount per security (in Rs.)		9,428,571		
Tatal		10.00		7.00.000
		94,285,710.00		
Amount to be treated as paid up (in Rs.) on each security		10.00		
Premium amount per security (if any) (in Rs.)		0.00		יי
Total premium amount (if any) (in Rs.)		0.00		
Amount of discount per security (if any) (in Rs.)		0.00		
Total discount amount (if any) (in Rs.)		0.00		
(a) Property and assets acquired				
(b) Goodwill				
(c) Services (give nature of services)				
(d) Conversion of Debentures				
(e) Conversion of Loans				

4. Securities allotted for consideration other than cash

Page 2 of 5 9L

5.	Bonus shares issued	
		(DD/MM/YYYY)
	(a) Date of allotment	
((b) Number of bonus shares	
(c) Nominal amount per share (in Rs.)	
(d) Amount to be treated as paid up per share (in Rs.)	
(e)* Date of passing shareholders' resolution	(DD/MM/YYYY)
(f) * SRN of Form No MGT-14	
6. 1	n respect of private placement	
(;	a) Category to whom allotment is made:	
	Existing shareholders	
	Employee	
	Directors	
	Qualified Institutional Buyers	
	Others	
(1	b) Declaration that in respect of preferential allotment or private placement the company h	as:
	allotted securities to less than two hundred persons in aggregate in a financial year ex	xcluding exempted categories,
	offered such securities through private placement offer letter and no prospectus or arbeen issued for the same;	y other public advertisement has
	completed allotment in respect of earlier private placement offers;	
	received money payable on subscription of such securities through cheque or demand but not in cash;	d draft or other banking channels
	made such offers only to the persons whose names were recorded by the company p	prior to such invitation and such
	persons have received such offer by name;	
	Maintained a complete record of such offers and acceptances in Form No. PAS-5.	

7.* Capital structure of the company after taking into consideration the above allotment(s) of shares:

Particulars	Authorized capital of the company	Issued capital of the company	Subscribed capital	Paid up capital
Number of equity shares	100,000,000	50,101,239	50,101,239	50,101,239
Nominal amount per equity share	10	10	10	10
Total amount of equity shares	1,000,000,000.00	501,012,390.00	501,012,390.00	501,012,390.00
Number of preference shares	0	0	0	0
Nominal value per preference share				
Total amount of preference shares				
Unclassified shares				
Total amount of unclassified shares (in Rs.)		144291		
Total	1,000,000,000.00	501,012,390.00	501,012,390.00	501,012,390.00



Page 3 of 5

8.* Debt Structure of the company after taking into consideration the above allotment(s) of debentures/ other security:

Particulars	Total number of securities	Nominal value per unit of security	Total amount
Debentures	0	0	0
Secured loans			99,000,000
Others, specify	0	0	0

9.*Whether complete list of allottees has been enclosed as an attachment.

In case No, then submit the details of all the allottees in a CD separately.

Yes	\bigcirc	No
() 163		

Attachments

- 1.*List of allottees. Attach separate list for each allotment (refer instruction kit for format). If not attached, then it shall be submitted separately in a CD.
- 2.*Copy of Board or shareholders' resolution.
- 3. Valuation Report from the valuer, if any;

Attach | List of Allo

List of Allottees.pdf
Certified True Copy of resolution.pdf
Valuation-Report_Compressed.pdf
CTC Final Order - LASA.pdf

List of attachments

Attach

Attach

Remove attachment

7. Optional attachment(s), if any.

Attach



-					
Dec	а	rai	u	О	n

I am authorized by the Board of Directors of the Company vide resolution no * 14 dated * 07/02/2022 to sign this form and declare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied with. Whatever is stated in this form and in the attachments thereto is true, correct and complete and no information material to the subject matter of this form has been suppressed or concealed and is as per the original records maintained by the promoters subscribing to the Memorandum of Association and Articles of Association.

It is further declared and verified that:

- 1. All the required attachments have been completely, correctly and legibly attached to this form.
- 2. The list of allottees is correct and complete as per records of the company.
- 3. Where the securities are issued other than cash, the contract as well as list of allottees and any other contract of sale, or a contract for services or other consideration in respect of which that allotment is made is attached herewith. If not, then an attachment has been attached by the company mentioning all the particulars of the contract in writing.

* To be digitally signed by	Omkar Pravin
* Designation Managing Director	Herlekar
* Director identification number of the director; OR	
DIN or PAN of the manager or CEO or CFO; or	01587154
Membership number of the Company Secretary	

Certificate by practicing professional

I declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 and rules thereunder for the subject matter of this form and matters incidental thereto and I have verified the above particulars (including attachment(s)) from the original/certified records maintained by the Company/applicant which is subject matter of this form and found them to be true, correct and complete and no information material to this form has been suppressed. I further certify that:

- i. The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order;
- ii. All the required attachments have been completely and legibly attached to this form.

* To be digitally signed by			ROCHO KUKREJA
* Chartered accountant (in w		or Ocsta	accountant (in whole-time practice) or
* Whether associate or fellow	Associate	Fellow	
* Membership number * Certificate of practice number			160218

Note: Attention is drawn to provisions of Section 448 of the Companies Act, 2013 which provide for punishment for false statement and certification.

Modify	Check Form	Prescrutiny	Submit

This eForm has been taken on file maintained by the registrar of companies through electronic mode and on the basis of statement of correctness given by the filing company.

Apshty Apshty

MINISTRY OF CORPORATE AFFAIRS RECEIPT

G.A.R.7

SRN: F56182652

Service Request Date: 05/01/2023

Payment made into : ICICI Bank

Received From:

Name:

HITESH DHRUVKUMAR WADHWANI

Address:

Section 20

Mumbai, Maharashtra

India - 421003

Entity on whose behalf money is paid

CIN:

L24233MH2016PLC274202

Name:

LASA SUPERGENERICS LIMITED

Address:

Plot no. C-4, C-4/1, MIDC

Lote Parshuram Industrial Area, Tal-Khe d,

Khed, Maharashtra

India - 415722

Full Particulars of Remittance

Service Type: eFiling

Service Description	Type of Fee	Amount(Rs.)	
Fee For Form PAS-3	Normal	600.00	
	Total	600.00	

Mode of Payment:

Credit Card- ICICI Bank

Received Payment Rupees: Six Hundred Only

Note –The Registrar may examine this eForm any time after the same is processed by the system under Straight Through Process (STP). In case any defects or incompleteness in any respect is noticed by the Registrar, then this eForm shall be treated and labeled as defective and the eForm shall have to be filed afresh with the fee and additional fee, as applicable. (Please refer Rule 10 of the Companies (Registration offices offices and Fees) Rules, 2014)



Applity

Page 1 of 1

FORM NO. INC-28

[Section 12(6), 13(7), 58(5),87, 111(5),66(1), 230, 232, 233, 234, 237, others of the Companies Act, 2013 and section107(3), 81(4), 167, 186, 391, 394,396,397, 398, 445, 481, 466, 518, 559 & 621A others of the Companies Act, 1956]



Notice of Order of the Court or Tribunal or any other competent authority

Form Language (English	O Hindi			
Refer instruction kit for filing the form	1.			
*Corporate identity number (Creation number (FCRN) (Corporate identity number (FCRN) (Corporate identity number (FCRN) (Corporate identity number (FCRN))		L24233MH2016PLC27	4202	Pre - Fill
(b) Global location number (GLN) of company			
2.(a) Name of the company	ASA SUPERGENERICS	LIMITED		
registered office of the company or of the principal place of business in India of	llot no. C-4, C-4/1, MIDC ote Parshuram Industrial hed atnagiri Iaharashtra 15722	Area, Tal -Khed,		
(c) e-mail ID of the company	s@lasalabs.com			
3.(a) *Order passed by	NCLT			
(b)*Name of the court or or Tribu	inal or any other compete	ent authority		
National Company Law Tribunal				
(c) *Location Mumbai (d) *Petition or application numbe	W.			
CP(CAA)111/MB/2021 in CA(CAA)				
(e) *Order number				
NA				
4. *Date of passing the order 2	3/12/2022 (DD/	MM/YYYY)		
5.(a) (i) Section of the Companies A	Act,2013 under which ord	der passed 232 - A	Amalgamation	
(ii)Section of the Companies A	Act,1956 under which ord	ler passed		
(iii)Section of Insolvency and E	Bankruptcy Code, 2016 ι	ınder which order passe	ed	
6. *Number of days within which ordered pursuant to aforesaid seconder or order of the competent a	ctions or in terms of court	order or Tribunal	30	
7. *Date of application to court or Tr issue of certified copy of order			27/12/2022	(DD/MM/YYYY)
8. *Date of issue of certified copy of		28/12/2022	(DD/MM/YYYY)	
9. Due date by which order is to be filed with Registrar [23/01/2023] (DD/MM/YYYY)				



1.	. In case of amalgamation, mention whether company filing the form is transferor or transferee	○ Transferor (•) Transferes

Pre-fill

Apshitty

13.(a) SRN of relevant form (Mention the SRN of relevant Form INC-23, INC-28 applicable)	8, CH	IG-1, CHG-4,	CHG-9, MGT-14 or any other form; if
14. *Whether penalty involved or not Yes	•	No	
Attachments 1. *Copy of court order or NCLT or CLB or	1	Attach	CTC Final Order - LASA_compressed CTC of Scheme LASA_compressed Note on Authorised Capital.pdf

order by any other competent authority.

2. Optional attachment(s) - if any

Attach

ed.pdf .pdf

Remove attachment



MINISTRY OF CORPORATE AFFAIRS RECEIPT

G.A.R.7

SRN: F55859441

Service Request Date: 04/01/2023

Payment made into : ICICI Bank

Received From:

Name:

HITESH DHRUVKUMAR WADHWANI

Address:

Section 20

Mumbai, Maharashtra

India - 421003

Entity on whose behalf money is paid

CIN:

L24233MH2016PLC274202

Name:

LASA SUPERGENERICS LIMITED

Address:

Plot no. C-4, C-4/1, MIDC

Lote Parshuram Industrial Area, Tal-Khe d,

Khed, Maharashtra

India - 415722

Full Particulars of Remittance

Service Type: eFiling

Service Description	Type of Fee	Amount(Rs.)
Fee For Form INC-28	Normal	600.00
	Total	600.00

Mode of Payment:

Credit Card- ICICI Bank

Received Payment Rupees: Six Hundred Only

Note: The defects or incompleteness in any respect in this eForm as noticed shall be placed on the Ministry's website (www.mca.gov.in). In case the eForm is marked as RSUB or PUCL, please resubmit the eForm or file Form GNL-4(Addendum), respectively. Please track the status of your transaction at all times till it is finally disposed off. (Please refer Rule 10 of the Companies (Registration offices and Fees) Rules, 2014) It is compulsory to file Form GNL-4 (Addendum) electronically within the due date whenever the document is put under PUCL, failing which the system will treat the document as invalid and will not be taken on record in accordance with Rule 10(4) of the Companies (Registration offices and Fees) Rules, 2014



FORM NO. INC-28

[Section 12(6), 13(7), 58(5),87, 111(5),66(1), 230, 232, 233, 234, 237, others of the Companies Act, 2013 and section107(3), 81(4), 167, 186, 391, 394,396,397, 398, 445, 481, 466, 518, 559 & 621A ,others of the Companies Act, 1956]



Notice of Order of the Court or Tribunal or any other competent authority

Form Language 🌘 English 🔘 Hindi				
Refer instruction kit for filing the form.				
*Corporate identity number (CIN) or foreign compregistration number (FCRN) of the company	Pre - Fill			
(b) Global location number (GLN) of company				
2.(a) Name of the company HARISHREE AROMA	HARISHREE AROMATICS AND CHEMICALS PRIVATE LIMITED			
	Mumbai Mumbai City Maharashtra			
(c) e-mail ID of the company cs@lasalabs.com				
3.(a) *Order passed by NCLT				
(b) *Name of the court or or Tribunal or any other cor	npetent authority			
National Company Law Tribunal				
(c) *Location Mumbai				
(d) *Petition or application number				
CP(CAA)111/MB/2021 in CA(CAA)1157/MB/2020				
(e) *Order number				
NA				
4. *Date of passing the order 23/12/2022	(DD/MM/YYYY)			
5.(a) (i) Section of the Companies Act,2013 under which	ch order passed 232 - Amalgamation			
(ii)Section of the Companies Act, 1956 under which	ch order passed			
(iii)Section of Insolvency and Bankruptcy Code, 2	016 under which order passed			
 *Number of days within which order is to be filed with entered pursuant to aforesaid sections or in terms of order or order of the competent authority, as the case 	court order or Tribunal			
7. Date of application to court or Tribunal or the compersions of certified copy of order	etent authority for 27/12/2022 (DD/MM/YYY			
8. *Date of issue of certified copy of order	28/12/2022 (DD/MM/YYYY)			
9. Due date by which order is to be filed with Registrar	23/01/2023 (DD/MM/YYYY)			
	- An			



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11. In case of amalgamation, mention whether company filing the form is transferor or transferee Transferor Transferoe

(b) Details of transferee company

(1	b) Details of trar	nsferee company
	CIN/FCRN	L24233MH2016PLC274202 Pre-fill
	Name	LASA SUPERGENERICS LIMITED
	Appointed date	e of amalgamation 01/04/2020 (DD/MM/YYYY)



13.(a) SRN of relevant form		
(Mention the SRN of relevant Form INC-23, INC applicable)	-28, CHG-1, CHG-4, CH	IG-9, MGT-14 or any other form; if
14. *Whether penalty involved or not Yes	No	
Attachments		CTC Final Order - LASA_compressed.pdf
*Copy of court order or NCLT or CLB or order by any other competent authority.	Attach	CTC of Scheme LASA_compressed.pdf
2. Optional attachment(s) - if any	Attach	
		Remove attachment



Declaration

I am authorized t	by the Board of Directors of the Company vide resolution no.* 14 to sign the form and declare that all the requirements of the companies Act,2013
Dated • 07/02	1/2022 to sign the form and declare that declare the subject matter of this form and matters incidental thereto have
and rules there	under in respect of the subject matter of this form and the subject matter of the subject matter of this form and the subject matter of the subject matter o
been compiled w	with. I further declare that: stated in this form and in the attachments thereto is true ,correct and complete and no stated in this form and in the attachments thereto is true ,correct and complete and no
information mate	erial to the subject matter of this form has been supplied
All the require	ad attachments have been completely and legibly attached to this form
	Corola or Depart square
*To be digitally	Signed by ne person signing and submitting the form Omkar Stylent specific Prayin Stylent specific Prayi
*Name	OMKAR HERLEKAR PRAVIN
	OWNARTHEREETOTICTOR
Capacity	
*Designation	Director
DIN or Income-	tax PAN or Membership number 01587154
	Certificate by practicing professional
	trians of the Companies Act, 2013 and Rules thereunder for
It is hereby cer	tified that I have gone through the provisions of the Companies 7td, 25 repairs (including tter of this form and matters incidental thereto and I have verified the above particulars (including tter of this form and matters incidental thereto and I have verified the above particulars (including tter of this form and found
attachment(s))	from the original records maintained by the company has been suppressed. c, correct and complete and no information material to this form has been suppressed.
O Chartered a	accountant (in whole-time practice) or
Ost accou	intant (in whole-time practice) or
O Company s	secretary (in whole-time practice)
*Whether asso	ociate or fellow Associate Fellow
	to attifacts of practice number
*Membership n	
Note: Attention	n is drawn to provisions of Section 448 and 449 which provide for punishment for nt/certificate and punishment for false evidence respectively.
false statemer	nt/certificate and pullishment for false
	Prescrutiny Submit
Modify	Check Form
The About Street Add to the Assessment	
For office use	
eForm Service	e request number (SRN) eForm filing date (DD/MM/YYYY)
This e-Form is	s hereby registered Confirm submission
Digital signa	ture of the authorising officer
	(DD/MM/YYYY)
Date of signir	ng (Caracian)
	JERICS
	(19) AM LINES
	TO DOWN

MINISTRY OF CORPORATE AFFAIRS RECEIPT

G.A.R.7

SRN: F55777163 Service Request Date: 03/01/2023

Payment made into: ICICI Bank

Received From:

Name: HITESH DHRUVKUMAR WADHWANI

Address: Section 20

Mumbai, Maharashtra

India - 421003

Entity on whose behalf money is paid

CIN: U24110MH1998PTC116369

Name: HARISHREE AROMATICS AND CHEMICALS PRIVATE LIMITED

Address: Office No 506 & 507, Midas, Sahar Plaza

Andheri Kurla road Andheri (East)

Mumbai, Maharashtra

India - 400059

Full Particulars of Remittance

Service Type: eFiling

Service Description	7 10	Type of Fee	Amount(Rs.)
Fee For Form INC-28		Normal	500.00
		Total	500.00

Mode of Payment: Credit Card- ICICI Bank

Received Payment Rupees: Five Hundred Only

Note: The defects or incompleteness in any respect in this eForm as noticed shall be placed on the Ministry's website (www.mca.gov.in). In case the eForm is marked as RSUB or PUCL, please resubmit the eForm or file Form GNL-4(Addendum), respectively. Please track the status of your transaction at all times till it is finally disposed off. (Please refer Rule 10 of the Companies (Registration offices and Fees) Rules, 2014) It is compulsory to file Form GNL-4 (Addendum) electronically within the due date whenever the document is put under PUCL, failing which the system will treat the document as invalid and will not be taken on record in accordance with Rule 10(4) of the Companies (Registration offices and Fees) Rules, 2014

